

DOCKET NO. SC10776P D01

## UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S) Darrell G. Hill et al. GROUP ART UNIT: 2826  
APPLN. NO.: 10/007,754 EXAMINER: Victor A. Mandala  
FILED: November 15, 2001  
TITLE: METHOD OF MANUFACTURING A SEMICONDUCTOR  
COMPONENT AND SEMICONDUCTOR COMPONENT THEREOF

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on 12-12-03

Pat Thomas  
Signature

Pat Thomas  
Printed Name of Person Signing Certificate

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Responsive to the Office Action dated September 12, 2003, Paper No. , and Examiner's  
comments with regard thereto, please enter the following amendments in the above-entitled  
application, without prejudice or disclaimer.

DOCKET NO. SC10776P D01

**MOTOROLA**  
**FAX TRANSMITTAL SHEET**

Motorola, Inc.  
Law Department  
7700 W. Parmer Lane  
MD: TX32/PL02  
Austin, TX 78729  
Telephone: (512) 996-6839  
Facsimile: (512) 996-6854

**10** Number of Pages (including this page)

Date: December 12, 2003  
To: Victor A. Mandala - 2826  
Location: United States Patent and Trademark Office  
Fax No.: 703-872-9306  
From: Joanna G. Chiu - 43,629  
Subject: 10/007,754- Darrell G. Hill et al.

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**MESSAGE:**

Enclosed herewith, please find a FORMAL AMENDMENT for filing in the below-identified application. If Applicant has overlooked any fees, or if any overpayment has been made, the Commissioner is hereby authorized to credit or debit Deposit 502117.

**ALL ITEMS MARKED WITH AN "X" ARE INCLUDED:**


|    |   |                                       |
|----|---|---------------------------------------|
| 1. | x | 1 page Facsimile Cover Sheet          |
| 2. | x | 7 page Amendment                      |
| 3. | x | 1 page Fee Transmittal (in duplicate) |

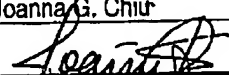
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**I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS  
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ON: 12-12-03  
DatePat Thomas  
Signature**PLEASE GIVE THESE PAPERS TO:**

EXAMINER: Victor A. Mandala  
GROUP ART UNIT: 2826  
SERIAL NO.: 10/007,754  
FILED: NOVEMBER 15, 2001  
INVENTOR: DARRELL G. HILL ET AL.

| FEE<br>TRANSMITTAL   |   | Complete if Known   |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|--|---|---|------------------------|--|-----------------|---|--------------------|-----------------|------|----------|------|--------------------|------|------|------|------|-------------------------------------|-------------------|----|------|-----|-------------------------------------|----------------|------------------|----------------|-----------------|---------------------------|-----------------|------|--------------------|------|---|------|------|------------------------|------------------------|--|--------------|-------|------|-------|---|------|-----|------|-----|--|------|---------------------------------------|------|-----|---|------|-----|------|---|--|------|------|------|-----|---|---|--------------|------|-----|--|------|-----|------|-----|------------------|------|-----|------|-----|--|------|-----|------|-----|--------------------------|------|------|------|------|---|------|-----|------|----|----------------------------------|------|------|------|-----|------------------------------------|------|------|------|-----|--------------------------------|------|-----|------|-----|------------------|------|-----|------|-----|-----------------|------|-----|------|-----|-------------------------------|------|----|------|----|-------------------------------------|------|-----|------|-----|-------------------|------|----|------|----|--|------|-----|------|-----|---|------|-----|------|-----|--|------|-----|------|-----|---|------|-----|------|-----|---|---------------------------|--|--|--|--|
| Patent fees are subject to annual revision   |   | Application Number  | 10/007,754             |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Filing Date   | November 15, 2001      |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | First Named Inventor  | Darrell G. Hill et al. |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Examiner Name   | Victor A. Mandala      |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Group Art Unit  | 2826                   |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT  |   | (\$)  | 172                    |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Attorney Docket No.   | SC10776P D01           |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| METHOD OF PAYMENT  |   | FEE CALCULATION (continued)   |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:<br>Deposit Account Number <u>502117</u><br>Deposit Account Name <u>Motorola, Inc.</u><br><br><input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |   | 3. ADDITIONAL FEES<br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Code</th> <th>Fee (\$)</th> <th>Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1061</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>1870</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1300</td><td>2453</td><td>650</td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1300</td><td>2501</td><td>650</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td>Plant issue fee</td></tr> <tr><td>1480</td><td>130</td><td>1480</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(g)</td></tr> <tr><td>1808</td><td>180</td><td>1808</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="5">Other fee (specify) _____</td></tr> </tbody> </table> |                        | Large Entity   |                 | Small Entity  |                    | Fee Description | Code | Fee (\$) | Code | Fee (\$)           | 1061 | 130  | 2051 | 65   | Surcharge - late filing fee or oath | 1052              | 50 | 2052 | 25  | Surcharge - late Provisional filing | 1053           | 130              | 1053           | 130             | Non-English specification | 1812            | 2520 | 1812               | 2520 | For filing a request for ex parte Reexamination | 1804 | 920* | 1804                   | 920*                   | Requesting publication of SIR prior to Examiner action | 1805         | 1840* | 1805 | 1840* | Requesting publication of SIR after Examiner action | 1251 | 110 | 2251 | 55  | Extension for reply within first month | 1252 | 410                                   | 2252 | 205 | Extension for reply within second month | 1253 | 930 | 2253 | 465   | Extension for reply within third month | 1254 | 1450 | 2254 | 725 | Extension for reply within fourth month | 1255  | 1870         | 2255 | 985 | Extension for reply within fifth month | 1401 | 320 | 2401 | 160 | Notice of Appeal | 1402 | 320 | 2402 | 160 | Filing a brief in support of an appeal | 1403 | 280 | 2403 | 140 | Request for oral hearing | 1451 | 1510 | 1451 | 1510 | Petition to institute a public use proceeding | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | 1453 | 1300 | 2453 | 650 | Petition to revive - unintentional | 1501 | 1300 | 2501 | 650 | Utility issue fee (or reissue) | 1502 | 470 | 2502 | 235 | Design issue fee | 1503 | 630 | 2503 | 315 | Plant issue fee | 1480 | 130 | 1480 | 130 | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(g) | 1808 | 180 | 1808 | 180 | Submission of IDS | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 1809 | 750 | 2809 | 375 | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 750 | 2810 | 375 | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 750 | 2801 | 375 | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  |
| Large Entity   |   | Small Entity  |                        | Fee Description  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Code   | Fee (\$)  | Code  | Fee (\$)               |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1061   | 130   | 2051  | 65                     | Surcharge - late filing fee or oath  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1052   | 50  | 2052  | 25                     | Surcharge - late Provisional filing  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1053   | 130   | 1053  | 130                    | Non-English specification  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1812   | 2520  | 1812  | 2520                   | For filing a request for ex parte Reexamination                            |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1804   | 920*  | 1804  | 920*                   | Requesting publication of SIR prior to Examiner action                     |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1805   | 1840*   | 1805  | 1840*                  | Requesting publication of SIR after Examiner action                        |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1251   | 110   | 2251  | 55                     | Extension for reply within first month                                     |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1252   | 410   | 2252  | 205                    | Extension for reply within second month                                    |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1253   | 930   | 2253  | 465                    | Extension for reply within third month                                     |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1254   | 1450  | 2254  | 725                    | Extension for reply within fourth month                                    |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1255   | 1870  | 2255  | 985                    | Extension for reply within fifth month                                     |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1401   | 320   | 2401  | 160                    | Notice of Appeal   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1402   | 320   | 2402  | 160                    | Filing a brief in support of an appeal                                     |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1403   | 280   | 2403  | 140                    | Request for oral hearing   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1451   | 1510  | 1451  | 1510                   | Petition to institute a public use proceeding                              |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1452   | 110   | 2452  | 55                     | Petition to revive - unavoidable   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1453   | 1300  | 2453  | 650                    | Petition to revive - unintentional   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1501   | 1300  | 2501  | 650                    | Utility issue fee (or reissue)   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1502   | 470   | 2502  | 235                    | Design issue fee   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1503   | 630   | 2503  | 315                    | Plant issue fee  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1480   | 130   | 1480  | 130                    | Petitions to the Commissioner  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1807   | 50  | 1807  | 50                     | Processing fee under 37 CFR 1.17(g)  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1808   | 180   | 1808  | 180                    | Submission of IDS  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 8021   | 40  | 8021  | 40                     | Recording each patent assignment per property (times number of properties) |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1809   | 750   | 2809  | 375                    | Filing a submission after final rejection (37 CFR § 1.129(a))              |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1810   | 750   | 2810  | 375                    | For each additional invention to be examined (37 CFR § 1.129(b))           |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1801   | 750   | 2801  | 375                    | Request for Continued Examination (RCE)                                    |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1802   | 900   | 1802  | 900                    | Request for expedited examination of a design application                  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Other fee (specify) _____  |   |   |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| FEE CALCULATION  |   |   |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1. BASIC FILING FEE<br><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Large Fee (\$)</th> <th>Small Fee Code</th> <th>Small Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5" style="text-align: right;">SUBTOTAL (1)</td><td>(\$)</td></tr> </tbody> </table>   |   | Large Fee Code  | Large Fee (\$)         | Small Fee Code   | Small Fee (\$)  | Fee Description   | Fee Paid           | 1001            | 750  | 2001     | 375  | Utility filing fee |      | 1002 | 330  | 2002 | 165                                 | Design filing fee |    | 1003 | 520 | 2003                                | 260            | Plant filing fee |                | 1004            | 750                       | 2004            | 375  | Reissue filing fee |      | 1005  | 160  | 2005 | 80                     | Provisional filing fee |  | SUBTOTAL (1) |       |      |       |   | (\$) |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Large Fee Code   | Large Fee (\$)  | Small Fee Code  | Small Fee (\$)         | Fee Description  | Fee Paid        |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1001   | 750   | 2001  | 375                    | Utility filing fee   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1002   | 330   | 2002  | 165                    | Design filing fee  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1003   | 520   | 2003  | 260                    | Plant filing fee   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1004   | 750   | 2004  | 375                    | Reissue filing fee   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1005   | 160   | 2005  | 80                     | Provisional filing fee   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| SUBTOTAL (1)   |   |   |                        |  | (\$)            |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 2. EXTRA CLAIM FEES<br><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Independent Claims</td> <td>2</td> <td>3</td> <td>18</td> <td>0</td> </tr> <tr> <td>Multiple Dependent</td> <td>5</td> <td>2</td> <td>86</td> <td>172</td> </tr> <tr> <td colspan="3"></td> <td>280</td> <td></td> </tr> </tbody> </table><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Large Fee (\$)</th> <th>Small Fee Code</th> <th>Small Fee (\$)</th> <th>Entity Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td></td><td></td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>94</td><td>2201</td><td>42</td><td></td><td></td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td></td><td></td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td></td><td></td><td>* Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td></td><td></td><td>* Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="7" style="text-align: right;">SUBTOTAL (2)</td></tr> </tbody> </table> |   | Total Claims  | Previously Paid**      | Extra Claims   | Fee from below  | Fee Paid  | Independent Claims | 2               | 3    | 18       | 0    | Multiple Dependent | 5    | 2    | 86   | 172  |                                     |                   |    | 280  |     | Large Fee Code                      | Large Fee (\$) | Small Fee Code   | Small Fee (\$) | Entity Fee Code | Entity Fee (\$)           | Fee Description | 1202 | 18                 | 2202 | 9   |      |      | Claims in excess of 20 | 1201                   | 94   | 2201         | 42    |      |       | Independent claims in excess of 3                   | 1203 | 280 | 2203 | 140 |  |      | Multiple dependent claim, if not paid | 1204 | 84  | 2204                                    | 42   |     |      | * Reissue independent claims over original patent | 1205                                   | 18   | 2205 | 9    |     |   | * Reissue claims in excess of 20 and over original patent | SUBTOTAL (2) |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Total Claims   | Previously Paid**   | Extra Claims  | Fee from below         | Fee Paid   |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Independent Claims   | 2   | 3   | 18                     | 0  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Multiple Dependent   | 5   | 2   | 86                     | 172  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   |   | 280                    |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Large Fee Code   | Large Fee (\$)  | Small Fee Code  | Small Fee (\$)         | Entity Fee Code  | Entity Fee (\$) | Fee Description   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1202   | 18  | 2202  | 9                      |  |                 | Claims in excess of 20                                    |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1201   | 94  | 2201  | 42                     |  |                 | Independent claims in excess of 3                         |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1203   | 280   | 2203  | 140                    |  |                 | Multiple dependent claim, if not paid                     |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1204   | 84  | 2204  | 42                     |  |                 | * Reissue independent claims over original patent         |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| 1205   | 18  | 2205  | 9                      |  |                 | * Reissue claims in excess of 20 and over original patent |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| SUBTOTAL (2)   |   |   |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above   |   |   |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| SUBMITTED BY   |   | Complete (if applicable)  |                        |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Name (Print/Type)  | Joanna G. Chiu  | Registration No.  | 43,629                 |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
| Signature  |  | Telephone   | 512-996-8839           |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |
|  |   | Date  | 12/12/03               |  |                 |   |                    |                 |      |          |      |                    |      |      |      |      |                                     |                   |    |      |     |                                     |                |                  |                |                 |                           |                 |      |                    |      |   |      |      |                        |                        |  |              |       |      |       |   |      |     |      |     |  |      |                                       |      |     |   |      |     |      |   |  |      |      |      |     |   |   |              |      |     |  |      |     |      |     |                  |      |     |      |     |  |      |     |      |     |                          |      |      |      |      |   |      |     |      |    |                                  |      |      |      |     |                                    |      |      |      |     |                                |      |     |      |     |                  |      |     |      |     |                 |      |     |      |     |                               |      |    |      |    |                                     |      |     |      |     |                   |      |    |      |    |  |      |     |      |     |   |      |     |      |     |  |      |     |      |     |   |      |     |      |     |   |                           |  |  |  |  |

| FEE<br>TRANSMITTAL   |   | Complete if Known   |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|--|---|---|------------------------|---|-----------------|--|----------|------|-----|-----------------|------|--------------------|------|------|------|------|--------------------|-------------------|-----|------|-----|----------------|-----------------|-------------------------------------|-----------------|-----------------|------|------|------|--------------------|-------------------------------------|------|-----|------|-----|-----------------------------------|------|---------------------------|------|------|---------------------------------------|------|------|------|---|---|------|------|------|---|---|--|------|-------|------|-------|--|--|---|------|-----|------|----|--|--|--|------|-----|------|-----|--|--|---|------|-----|------|-----|--|--|--|------|------|------|-----|--|--|---|------|------|------|-----|--|--|--|------|-----|------|-----|--|--|------------------|------|-----|------|-----|--|--|--|------|-----|------|-----|--|--|--------------------------|------|------|------|------|--|--|---|------|-----|------|----|--|--|----------------------------------|------|------|------|-----|--|--|------------------------------------|------|------|------|-----|--|--|--------------------------------|------|-----|------|-----|--|--|------------------|------|-----|------|-----|--|--|-----------------|------|-----|------|-----|--|--|-------------------------------|------|----|------|----|--|--|-------------------------------------|------|-----|------|-----|--|--|-------------------|------|----|------|----|--|--|--|------|-----|------|-----|--|--|---|------|-----|------|-----|--|--|--|------|-----|------|-----|--|--|---|------|-----|------|-----|--|--|---|---------------------------|--|--|--|--|--|--|
| Patent fees are subject to annual revision   |   | Application Number  | 10/007,754             |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|  |   | Filing Date   | November 15, 2001      |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|  |   | First Named Inventor  | Darrell G. Hill et al. |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|  |   | Examiner Name   | Victor A. Mandala      |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|  |   | Group Art Unit  | 2826                   |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| TOTAL AMOUNT OF PAYMENT  |   | (\$)  | 172                    |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|  |   | Attorney Docket No.   | SC10776P D01           |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| METHOD OF PAYMENT  |   | FEE CALCULATION (continued)   |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:<br>Deposit Account Number <span style="border: 1px solid black; padding: 2px;">502117</span><br>Deposit Account Name <span style="border: 1px solid black; padding: 2px;">Motorola, Inc.</span><br><br><input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17<br><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |   | 3. ADDITIONAL FEES<br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee</th> <th>Fee Description</th> </tr> <tr> <th>Code</th> <th>Code</th> <th>(\$)</th> <th>Code</th> <th>Code</th> <th>(\$)</th> <th></th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td></td><td></td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td></td><td></td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td></td><td></td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td></td><td></td><td>For-filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>820*</td><td>1804</td><td>920*</td><td></td><td></td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td></td><td></td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td></td><td></td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td></td><td></td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td></td><td></td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td></td><td></td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>985</td><td></td><td></td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td></td><td></td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td></td><td></td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td></td><td></td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td></td><td></td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td></td><td></td><td>Petition to revive - unavoidable</td></tr> <tr><td>1453</td><td>1300</td><td>2453</td><td>650</td><td></td><td></td><td>Petition to revive - unintentional</td></tr> <tr><td>1501</td><td>1300</td><td>2501</td><td>650</td><td></td><td></td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>470</td><td>2502</td><td>235</td><td></td><td></td><td>Design issue fee</td></tr> <tr><td>1503</td><td>630</td><td>2503</td><td>315</td><td></td><td></td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td></td><td></td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td></td><td></td><td>Processing fee under 37 CFR 1.17(g)</td></tr> <tr><td>1808</td><td>180</td><td>1808</td><td>180</td><td></td><td></td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td></td><td></td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>750</td><td>2809</td><td>375</td><td></td><td></td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>750</td><td>2810</td><td>375</td><td></td><td></td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>750</td><td>2801</td><td>375</td><td></td><td></td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td></td><td></td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="7">Other fee (specify) _____</td></tr> </tbody> </table> |                        | Large Entity  | Small Entity    | Fee  | Fee      | Fee  | Fee | Fee Description | Code | Code               | (\$) | Code | Code | (\$) |                    | 1051              | 130 | 2051 | 65  |                |                 | Surcharge - late filing fee or oath | 1052            | 50              | 2052 | 25   |      |                    | Surcharge - late Provisional filing | 1053 | 130 | 1053 | 130 |                                   |      | Non-English specification | 1812 | 2520 | 1812                                  | 2520 |      |      | For-filing a request for ex parte Reexamination | 1804  | 820* | 1804 | 920* |   |   | Requesting publication of SIR prior to Examiner action | 1805 | 1840* | 1805 | 1840* |  |  | Requesting publication of SIR after Examiner action | 1251 | 110 | 2251 | 55 |  |  | Extension for reply within first month | 1252 | 410 | 2252 | 205 |  |  | Extension for reply within second month | 1253 | 930 | 2253 | 465 |  |  | Extension for reply within third month | 1254 | 1450 | 2254 | 725 |  |  | Extension for reply within fourth month | 1255 | 1970 | 2255 | 985 |  |  | Extension for reply within fifth month | 1401 | 320 | 2401 | 160 |  |  | Notice of Appeal | 1402 | 320 | 2402 | 160 |  |  | Filing a brief in support of an appeal | 1403 | 280 | 2403 | 140 |  |  | Request for oral hearing | 1451 | 1510 | 1451 | 1510 |  |  | Petition to institute a public use proceeding | 1452 | 110 | 2452 | 55 |  |  | Petition to revive - unavoidable | 1453 | 1300 | 2453 | 650 |  |  | Petition to revive - unintentional | 1501 | 1300 | 2501 | 650 |  |  | Utility issue fee (or reissue) | 1502 | 470 | 2502 | 235 |  |  | Design issue fee | 1503 | 630 | 2503 | 315 |  |  | Plant issue fee | 1460 | 130 | 1460 | 130 |  |  | Petitions to the Commissioner | 1807 | 50 | 1807 | 50 |  |  | Processing fee under 37 CFR 1.17(g) | 1808 | 180 | 1808 | 180 |  |  | Submission of IDS | 8021 | 40 | 8021 | 40 |  |  | Recording each patent assignment per property (times number of properties) | 1809 | 750 | 2809 | 375 |  |  | Filing a submission after final rejection (37 CFR § 1.129(a)) | 1810 | 750 | 2810 | 375 |  |  | For each additional invention to be examined (37 CFR § 1.129(b)) | 1801 | 750 | 2801 | 375 |  |  | Request for Continued Examination (RCE) | 1802 | 900 | 1802 | 900 |  |  | Request for expedited examination of a design application | Other fee (specify) _____ |  |  |  |  |  |  |
| Large Entity   | Small Entity  | Fee   | Fee                    | Fee   | Fee             | Fee Description  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Code   | Code  | (\$)  | Code                   | Code  | (\$)            |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1051   | 130   | 2051  | 65                     |   |                 | Surcharge - late filing fee or oath  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1052   | 50  | 2052  | 25                     |   |                 | Surcharge - late Provisional filing  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1053   | 130   | 1053  | 130                    |   |                 | Non-English specification  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1812   | 2520  | 1812  | 2520                   |   |                 | For-filing a request for ex parte Reexamination                            |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1804   | 820*  | 1804  | 920*                   |   |                 | Requesting publication of SIR prior to Examiner action                     |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1805   | 1840*   | 1805  | 1840*                  |   |                 | Requesting publication of SIR after Examiner action                        |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1251   | 110   | 2251  | 55                     |   |                 | Extension for reply within first month                                     |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1252   | 410   | 2252  | 205                    |   |                 | Extension for reply within second month                                    |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1253   | 930   | 2253  | 465                    |   |                 | Extension for reply within third month                                     |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1254   | 1450  | 2254  | 725                    |   |                 | Extension for reply within fourth month                                    |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1255   | 1970  | 2255  | 985                    |   |                 | Extension for reply within fifth month                                     |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1401   | 320   | 2401  | 160                    |   |                 | Notice of Appeal   |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1402   | 320   | 2402  | 160                    |   |                 | Filing a brief in support of an appeal                                     |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1403   | 280   | 2403  | 140                    |   |                 | Request for oral hearing   |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1451   | 1510  | 1451  | 1510                   |   |                 | Petition to institute a public use proceeding                              |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1452   | 110   | 2452  | 55                     |   |                 | Petition to revive - unavoidable   |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1453   | 1300  | 2453  | 650                    |   |                 | Petition to revive - unintentional   |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1501   | 1300  | 2501  | 650                    |   |                 | Utility issue fee (or reissue)   |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1502   | 470   | 2502  | 235                    |   |                 | Design issue fee   |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1503   | 630   | 2503  | 315                    |   |                 | Plant issue fee  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1460   | 130   | 1460  | 130                    |   |                 | Petitions to the Commissioner  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1807   | 50  | 1807  | 50                     |   |                 | Processing fee under 37 CFR 1.17(g)  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1808   | 180   | 1808  | 180                    |   |                 | Submission of IDS  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 8021   | 40  | 8021  | 40                     |   |                 | Recording each patent assignment per property (times number of properties) |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1809   | 750   | 2809  | 375                    |   |                 | Filing a submission after final rejection (37 CFR § 1.129(a))              |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1810   | 750   | 2810  | 375                    |   |                 | For each additional invention to be examined (37 CFR § 1.129(b))           |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1801   | 750   | 2801  | 375                    |   |                 | Request for Continued Examination (RCE)                                    |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1802   | 900   | 1802  | 900                    |   |                 | Request for expedited examination of a design application                  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Other fee (specify) _____  |   |   |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| FEE CALCULATION  |   |   |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1. BASIC FILING FEE<br><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750</td><td>2001</td><td>375</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>330</td><td>2002</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>520</td><td>2003</td><td>260</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>750</td><td>2004</td><td>375</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr><td colspan="5" style="text-align: right;">SUBTOTAL (1)</td><td>(\$)</td></tr> </tbody> </table>   |   | Large Fee Code  | Entity Fee (\$)        | Small Fee Code  | Entity Fee (\$) | Fee Description  | Fee Paid | 1001 | 750 | 2001            | 375  | Utility filing fee |      | 1002 | 330  | 2002 | 165                | Design filing fee |     | 1003 | 520 | 2003           | 260             | Plant filing fee                    |                 | 1004            | 750  | 2004 | 375  | Reissue filing fee |                                     | 1005 | 160 | 2005 | 80  | Provisional filing fee            |      | SUBTOTAL (1)              |      |      |                                       |      | (\$) |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$)        | Fee Description   | Fee Paid        |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1001   | 750   | 2001  | 375                    | Utility filing fee  |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1002   | 330   | 2002  | 165                    | Design filing fee   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1003   | 520   | 2003  | 260                    | Plant filing fee  |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1004   | 750   | 2004  | 375                    | Reissue filing fee  |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1005   | 160   | 2005  | 80                     | Provisional filing fee                                    |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| SUBTOTAL (1)   |   |   |                        |   | (\$)            |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 2. EXTRA CLAIM FEES<br><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Previously Paid**</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>2</td> <td>20</td> <td>0</td> <td>18</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td>5</td> <td>3</td> <td>88</td> <td>172</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>280</td> <td></td> </tr> </tbody> </table><br><table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42</td><td>Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140</td><td>Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42</td><td>* Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>* Reissue claims in excess of 20 and over original patent</td></tr> <tr><td colspan="5" style="text-align: right;">SUBTOTAL (2)</td></tr> </tbody> </table> |   | Total Claims  | Previously Paid**      | Extra Claims  | Fee from below  | Fee Paid   | 2        | 20   | 0   | 18              | 0    | Independent Claims | 5    | 3    | 88   | 172  | Multiple Dependent |                   |     | 280  |     | Large Fee Code | Entity Fee (\$) | Small Fee Code                      | Entity Fee (\$) | Fee Description | 1202 | 18   | 2202 | 9                  | Claims in excess of 20              | 1201 | 84  | 2201 | 42  | Independent claims in excess of 3 | 1203 | 280                       | 2203 | 140  | Multiple dependent claim, if not paid | 1204 | 84   | 2204 | 42  | * Reissue independent claims over original patent | 1205 | 18   | 2205 | 9 | * Reissue claims in excess of 20 and over original patent | SUBTOTAL (2)   |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Total Claims   | Previously Paid**   | Extra Claims  | Fee from below         | Fee Paid  |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 2  | 20  | 0   | 18                     | 0   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Independent Claims   | 5   | 3   | 88                     | 172   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Multiple Dependent   |   |   | 280                    |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Large Fee Code   | Entity Fee (\$)   | Small Fee Code  | Entity Fee (\$)        | Fee Description   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1202   | 18  | 2202  | 9                      | Claims in excess of 20                                    |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1201   | 84  | 2201  | 42                     | Independent claims in excess of 3                         |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1203   | 280   | 2203  | 140                    | Multiple dependent claim, if not paid                     |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1204   | 84  | 2204  | 42                     | * Reissue independent claims over original patent         |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| 1205   | 18  | 2205  | 9                      | * Reissue claims in excess of 20 and over original patent |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| SUBTOTAL (2)   |   |   |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| **OR NUMBER PREVIOUSLY PAID, IF GREATER THAN STANDARD ALLOWANCE.<br>*For Reissues, see above   |   |   |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| SUBMITTED BY   |   | Complete (if applicable)  |                        |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Name (Print/Type)  | Joanna G. Chiu  | Registration No.  | 43,629                 |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
| Signature  |  | Telephone   | 512-996-6839           |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |
|  |   | Date  | 12/12/03               |   |                 |  |          |      |     |                 |      |                    |      |      |      |      |                    |                   |     |      |     |                |                 |                                     |                 |                 |      |      |      |                    |                                     |      |     |      |     |                                   |      |                           |      |      |                                       |      |      |      |   |   |      |      |      |   |   |  |      |       |      |       |  |  |   |      |     |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |      |      |     |  |  |   |      |      |      |     |  |  |  |      |     |      |     |  |  |                  |      |     |      |     |  |  |  |      |     |      |     |  |  |                          |      |      |      |      |  |  |   |      |     |      |    |  |  |                                  |      |      |      |     |  |  |                                    |      |      |      |     |  |  |                                |      |     |      |     |  |  |                  |      |     |      |     |  |  |                 |      |     |      |     |  |  |                               |      |    |      |    |  |  |                                     |      |     |      |     |  |  |                   |      |    |      |    |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |  |      |     |      |     |  |  |   |      |     |      |     |  |  |   |                           |  |  |  |  |  |  |

